PART B - FEE(S) TRANSMITTAL

	/O) '		%) . \							
Con	volete	e and	send	thris'	Yorm.	together	with	applicable	fee(s).	to:	Mail
- 1	/*			. •	1 , ,				(-,,		

APR 2 7 2006

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

PUBLICATION FEE

INSTRUCTIONS: This fear should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate of further sources pondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless estreeted below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

01/24/2006

BLAKELY SOKOLOFF TAYLOR AND ZAFMAN 12400 WILSHIRE BOULEVARD SEVENTH FLOOR LOS ANGELES, CA 900251026

SMALL ENTITY

04/28/2006 WABDELR3 00000027 08936338

01 FC:1501 02 FC:8001

APPLN. TYPE

Authorized Signature

1400.00 OP 30.00 OP Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mer. Olin Lin Deard (Depositor's name)

Complete the bland (Signature)

Note that the bland (Depositor's name)

(Signature)

TOTAL FEE(S) DUE

DATE DUE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/936,338	09/24/1997	RICHARD JOSEPH OLIVER	080398.P103	9642

TITLE OF INVENTION: METHOD AND SYSTEM FOR PROVIDING ENHANCED EDITING CAPABILITIES

ISSUE FEE

nonprovisional	NO	\$1400		\$0	\$140	0	04/24/2006		
EXAM	EXAMINER		Т	CLASS-SUBCLASS	7				
PENDLETO	2644		700-094000		-				
CFR 1.363). Change of correspon Address form PTO/SB/1 KK'Fee Address" indica	dence address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indic- or more recent) attached. Us	Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to						
			N THE PATENT (print or type) ee data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
(A) NAME OF ASSIGN							:		
(A) NAME OF ASSIGN		(B) Entertainme	RESIDENC	CE: (CITY and STATE OR CO	OUNTRY) Japan/Cu	lver Cit			
(A) NAME OF ASSIGN Ay Corporation/ Please check the appropriat 4a. The following fee(s) are XX ssue Fee Publication Fee (No.	Sony Pictures F e assignee category or catego	(B) Entertainme bries (will not be prin 4b. ed)	Payment Payment of Payment of Payment of The Direct The Direct The Direct The Direct Payment Payme	CE: (CITY and STATE OR CO	Japan/Cu Corporation or oth enclosed. 38 is attached. charge the require	lver Cit	y, CA o entity ☐ Governmen		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name Sheryl Sue Holloway

Registration No.

24, 2006

37,850



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:)
Oliver, et al.) Art Unit: 2644)
Serial No.: 08/936,338) Examiner: Pendleton, B.
Filed: September 24, 1997)
For: Method and System for Providing Enhanced Editing Capabilities	ng))
	<i></i>

Mail Stop Issue Fee P.O. Box 1450 Alexandria, VA 22313-1450

PAYMENT OF ISSUE FEE

In response to the Notice of Allowance mailed January 24, 2006, enclosed herewith for filing in the above-referenced patent application is a check in the amount of \$1,430.00 for payment of the issue fee and ten (10) soft copies of patent.

Please charge any shortages or credit any overages to our Deposit Account No. 02-2666.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date A Pric 24, 2006

Sheryl Sue Holloway Reg. No. 37,850

12400 Wilshire Boulevard Seventh Floor Los Angeles, CA 90025 (408) 720-8300

PE							Page 1 of 3
272	106 W E	ffective on	n 12/08/20	FEE TRANSMITT			05 (H.R. 4818).
"	Æ			TOTAL AMOUNT O	F PAYME	ENT (\$) <u>1430.00</u>	_
Compl	ete∯Kn	own:					
Applic	ation No	•	08/9	36,338			
STATES !			9/24/				
First N	amed In	ventor _					
Exami	ner Name	e		elton, B.		,	
Art Un			2644				
Attorne	ey Docke	et No	8039	8.P103		= =	
	_	Applic	ant clai	ms small entity status. S	See 37 Cl	FR 1.27.	
METH	OD OF	PAYME	NT (che	eck all that apply)			
X		(nev Orde	er None	Other (please identify)
	000.	`	_		,		
	Depos	sit Accou	ınt		•		
				nt Number : <u>02-2666</u>			
				nt Name:			
l x	The Di	rector is	Author	ized to do the following v	with resp	ect to the above-id	entified Deposit Account:
				indicated below.	•		•
	<u>x</u>			itional fee(s) or underpayme	ent of fee	(s) during the penden	cy of this application.
				indicated below except f			
	<u>X</u>	Credit	any ove	erpayments.		•	
	<u></u>		•	or future reply that requires	s a petitio	n for extension of tim	e should be treated as
		incorpo	orating a	n appropriate petition for ex	ctension o	f time and all required	d fees should be charged.
				may become public. Credit		rmation should not be	e included on this form.
Provide	credit ca	rd inform	ation and	d authorization on PTO-203	8		
EEE C	ALCUL	ATION					
1 22 0	ALOUL	A11011					
1. <u>BA</u>	SIC FILI	<u>ING, SE</u>	<u>ARCH,</u>	AND EXAMINATION F	EES		
Large	Entity	<u>Small</u>	<u>Entity</u>				
Fee	Fee	Fee	Fee				
Code	(\$)	Code	(\$)	Fee Description			<u>Fees Paid (\$)</u>
1011	300	2011	150	Utility application filir	ng fee		
1111	500	2111	250	Utility search fee	-	1,000/500	
1311	200	2311	100	Utility examination fe	е	Į.	
						٦	
1012	200	2012	100	Design application file	ing fee ⁻	J	
1112	100	2112	50	Design search fee	9 .00	430/215	
1312	130	2312	65	Design examination for	-	700/2.10	
1312	130	2312	03	Design examination to	CC	>	
1013	200	2013	100	Plant filing fee	_	J	
1113	300	2113	150	Plant search fee	-	660/330	
1313	160	2313	80	Plant examination fee	۸	300,000	
'3'3	100	2010		, iain saaniilation lee	•	~	
1004	300	2004	150	Reissue filing fee		J	
1114	500	2114	250	Reissue search fee		1,400/700	
1314	600	2314	300	Reissue examination	foo .	1,400//00	
1314	000	2314	300	ncissue examination	ICC	}	
						J	
1005	200	2005	100	Provisional application	n filing f	ee ·	
				•		SUBTOTAL	_ (1) \$ <u> </u>

2. EXCESS CLAIM FEES	
Z. ZAOLOO OLAIMI I LLO	
	Fee from
Extra Claims	below Fees Paid (\$)
Total Claims 20 or HP =	X =
HP = highest number of total claims paid for, if greater than 20	
Independent Claims3 or HP =	x =
HP = highest number of independent claims paid for, if greater than Multiple Dependent Claims	3 =
maniple seperacin dianna	
Large Entity Small Entity	
Fee Fee Fee	
Code (\$) Code (\$) Fee Description	
1202	
1203 360 2203 180 Multiple dependent claims, if no	t paid
	d more than in the original patent
1205 50 2205 25 Reissue: each independent clair	m more than in the original patent
	CURTOTAL (2) & 0
	SUBTOTAL (2) \$
3. APPLICATION SIZE FEE	
If the specification and drawings exceed 100 sheets of paper, the app	vication size for due is \$250 (\$125 for small
entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C	
, , , , , , , , , , , , , , , , , , ,	
Number of each add	
Total Sheets Extra Sheets 50 or fraction thereo	<u>below</u> <u>Fees paid (\$)</u>
100 =/50 =(round up to	whole number) X
Lorgo Entity Cmall Entity	
Large Entity Small Entity Fee Fee Fee Fee Fee Description: Application s	size fee for each additional group of 50 sheets
	spec & drawings except sequences & program listings):
(4) 55 (5)	separation and an analysis of the separation and th
1081 250 2081 125 Utility	
1082 250 2082 125 Design	
1083 250 2083 125 Plant	
1084 250 2084 125 Reissue	
	SUBTOTAL (3) \$0

FEE CALCULATION (continued) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Small Entity Large Entity Fee Fee Fee Fee Code (\$) Code (\$) **Fee Description** 1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet 130 1053 130 Non-English specification 1053 2.520 For filing a request for ex parte reexamination 1812 2.520 1812 1813 8,800 1813 8,800 Request for inter parties reexamination Requesting publication of SIR prior to Examiner action 1804 920* 1804 920* 1,840* 1805 1805 1,840* Requesting publication of SIR after Examiner action 1251 120 2251 60 Extension for reply within first month 1252 450 2252 225 Extension for reply within second month 1253 1,020 2253 510 Extension for reply within third month 1,590 2254 795 Extension for reply within fourth month 1254 1255 2,160 2255 1.080 Extension for reply within fifth month 1401 500 2401 250 **Notice of Appeal** 1402 500 2402 250 Filing a brief in support of an appeal 1403 1,000 2403 500 Request for oral hearing Petition to institute a public use proceeding 1451 1,510 1451 1,510 2452 250 Petition to revive - unavoidable 1452 500 2453 Petition to revive - unintentional 1453 1,500 750 1400.00 1501 1,400 2501 700 Utility issue fee (or reissue) 800 2502 400 Design issue fee 1502 1503 1100 2503 550 Plant issue fee Petitions to the Commissioner (CFR 1.17(f) Group I) 1462 400 1462 400 200 Petitions to the Commissioner (CFR 1.17(g) Group II) 1463 200 1463 1464 130 Petitions to the Commissioner (CFR 1.17(h) Group III) 1464 130 1807 50 1807 **50** Processing fee under 37 CFR 1.17(q) 1806 180 1806 180 Submission of Information Disclosure Stmt 8021 40 8021 40 Recording each patent assignment per property (times number of properties) 790 395 1809 2809 For filing a submission after final rejection (see 37 CFR 1.129(a)) 65 1814 130 2814 Statutory Disclaimer 790 For each additional invention to be examined 1810 2810 395 (see 37 CFR 1.129(b)) 1801 790 2801 395 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination of a design application 1504 300 1504 300 Publication fee for early, voluntary, or normal pub. 1505 300 1505 300 Publication fee for republication 1803 130 1803 130 Request for voluntary publication or republication 1808 130 1808 130 Processing fee under 37 CFR 1.17(i) (except provisionals) 1454 1,370 1454 1,370 Acceptance of unintentionally delayed claim for priority Other fee (specify) Advanced order of soft copies of issued patent (10@3.00 each) 30.00 Other fee (specify) SUBTOTAL (4) \$ 1430.00 *Reduced by Basic Filing Fee Paid **SUBMITTED BY:** Typed or Printed Name: **Sheryl Sue Holloway Telephone Number:** 408-720-8300 Reg. Number: <u>37,850</u>

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450